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REQUEST
FOR
CONTINUED EXAMINATION (RCE)
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ction of information unless it displays a valid OMB control number.			
Application Number	0 0/863,16 6 09	845,	15
Filing Date	May 24, 2001	亞	
First Named Inventor	Randell T. Irvin	Я	MAY
Art Unit	1645	a	2
Examiner Name	J. Graser	R 16	70
Attorney Docket Number	113190-064	00/2	ਬ
	Application Number Filing Date First Named Inventor Art Unit Examiner Name	Application Number 0044456 09 Filling Date May 24, 2001 First Named Inventor Randell T. Irvin Art Unit 1645	Application Number Application Number Application Number May 24, 2001 First Named Inventor Randell T. Irvin Art Unit Lexaminer Name J. Graser Section 100 664

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8. 1995. or to any design application. Set instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

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1	1. Submission required under 37 CFR §1.114				
1	a. Previously submitted				
ı	i. Consider the amendment(s)/reply under 37 CFR §1.116 previously filed on				
ı	(Any unentered amendment(s) referred to above will be entered).				
1	ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on				
1	iii. □ Other				
1	b. 🗵 Enclosed				
	i. ☑ Amendment/Reply iii. ☑ Information Disclosure Statement (IDS)				
1	ii.				
12	2. Miscellaneous				
1	a. Suspension of action on the above-identified application is requested under 37 CFR §1.103(c) for				
1	a period of months (Period of suspension shall not exceed 3 months; Fee under 37 CFR§1.17(i) required) b. □ Other				
13	3. Fees The RCE fee under 37 CFR §1.17(e) is required by 37 CFR §1.114 when the RCE is filed.				
1	a. A The Director is hereby authorized to charge the following fees, or credit any overpayments, to				
1	Deposit Account No. 02-1818				
ļ					
II D Extension of time for (27 CFD 554 425 and 4 47)					
1	iii. \(\text{M}\) Other Any additional fees \(\frac{6}{70.6500}\)				
1	b. Check in the amount of \$ 840.00 enclosed				
2	C Decement by gradit gard (5 DTO 0000 and said				
	WARNING: Information on this form may become public. Credit card information should not				
be included on this form. Provide credit card information and authorization on PTO-2038.					
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1	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
E	Name (Print / Type) Thomas C. Basso Registration No. (Attorney / Agent) 46,541				
	Signature Date May 19, 2003				
e/	CERTIFICATE OF MAILING OR TRANSMISSION				
2 Ih	I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in				
	an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark				
۹۴	Tracemark Name (Print/Type)				
ď-	Signature Date				
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Burden Hur Statement. This form is estimated to beke 0.2 hours its compete. Time will use depending upon the needs of the Publishad case. Any comments on the amount of time you are required to complete this firm should be earlied in the Chief Information Officery U.S. Passent and Tademask Office, Washington, O.2.21. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box DCC, Washington, O.2.221.